

## Wage Amendment Sheet

**From:** \_\_\_\_\_  
(Company)

**Address:** \_\_\_\_\_

**Effective as of:** \_\_\_\_\_ **Trade:** \_\_\_\_\_

**Wage Scale: Period – (Hours, Months, Years):** \_\_\_\_\_  
Number - Period

**This is to be expressed in percentages%**

|                 |  |                 |  |                  |  |
|-----------------|--|-----------------|--|------------------|--|
| 1 <sup>st</sup> |  | 5 <sup>th</sup> |  | 9 <sup>th</sup>  |  |
| 2 <sup>nd</sup> |  | 6 <sup>th</sup> |  | 10 <sup>th</sup> |  |
| 3 <sup>rd</sup> |  | 7 <sup>th</sup> |  |                  |  |
| 4 <sup>th</sup> |  | 8 <sup>th</sup> |  |                  |  |

**This is to be expressed in dollars and cents**

Minimum journeyperson's wage rate as of: \_\_\_\_\_ \$ \_\_\_\_\_ per hour  
Date Amount

Hours per day \_\_\_\_\_ Hours per week \_\_\_\_\_ Premium Rate \_\_\_\_\_

**# of Journeypersons** \_\_\_\_\_ **Potential # of Apprentices** \_\_\_\_\_  
(in accordance with M.G.L. c.23, ss. 11E-11L.)

\_\_\_\_\_  
**Signature of Program Sponsor / Person Responsible for Program**

\_\_\_\_\_  
**Date**

**Field Approval:** \_\_\_\_\_  
Compliance Officer

\_\_\_\_\_  
**Date**

**Final Approved by:** \_\_\_\_\_  
Director / Division of Apprentice Standards

\_\_\_\_\_  
**Date**